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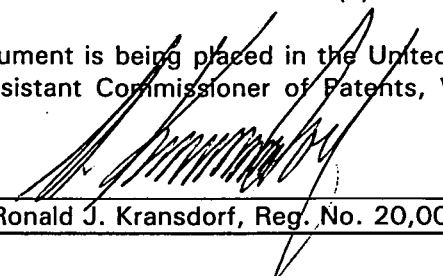
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Applicants: Altshuler
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For: METHOD AND APPARATUS FOR HAIR REMOVAL

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Ronald J. Kransdorf, Reg. No. 20,004

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Sir:

Transmitted herewith is/are the following document(s):

- ☒ Information Disclosure Statement
- ☒ Form PTO-1449 and References

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at (617)720-3500, Boston, Massachusetts.

No fee is enclosed. If a fee is required, the balance may be charged to the account of the undersigned, Deposit Account No. 23/2825. A duplicate of this sheet is enclosed.

Respectfully Submitted,


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